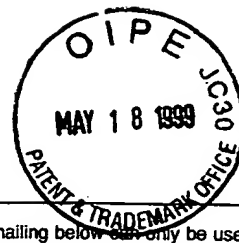


PART B—ISSUE FEE TRANSMITTAL

Complete and mail this form, together with

 fees, to: **Box ISSUE FEE**
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B1/P

MAILING INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE. Blocks 1 through 4 should be completed where appropriate. All further correspondence including the Issue Fee Receipt, the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

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MM41/0216

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Rose M. Fichtel (Depositor's name)

Rose M Fichtel (Signature)

May 17, 1999 (Date)

| APPLICATION NO. | FILING DATE | TOTAL CLAIMS | EXAMINER AND GROUP ART UNIT | DATE MAILED |
|---|-------------|--------------|-----------------------------|---------------|
| 08/847,314 | 04/23/97 | 019 | MUNSON, G | 2811 02/16/99 |
| First Named Applicant YAMAZAKI, 35 USC 154(b) term ext. = 0 Days. | | | | |

TITLE OF INVENTION: LASER PROCESSING METHOD, METHOD FOR FORMING A FLASH MEMORY, INSULATED GATE SEMICONDUCTOR DEVICE AND METHOD FOR FORMING THE SAME

| ATTY'S DOCKET NO. | CLASS-SUBCLASS | BATCH NO. | APPLN. TYPE | SMALL ENTITY | FEE DUE | DATE DUE |
|-------------------|----------------|-----------|-------------|--------------|-----------|----------|
| 2 0756-1650 | 257-316.000 | F19 | UTILITY | NO | \$1210.00 | 05/17/99 |

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Use of PTO form(s) and Customer Number are recommended, but not required.

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

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2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

Sixbey, Friedman, Leedom & Ferguson, P.C.
 Eric J. Robinson
 2 _____
 3 _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the PTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

Semiconductor Energy Laboratory Co., Ltd.

(B) RESIDENCE: (CITY & STATE OR COUNTRY)

Kanagawa-ken, Japan

Please check the appropriate assignee category indicated below (will not be printed on the patent)

☐ individual ☒ corporation or other private group entity ☐ government

4a. The following fees are enclosed (make check payable to Commissioner of Patents and Trademarks):

☒ Issue Fee
☒ Advance Order - # of Copies 10

4b. The following fees or deficiency in these fees should be charged to:

DEPOSIT ACCOUNT NUMBER 19-2380 (0756-1650)
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☒ Issue Fee
☒ Advance Order - # of Copies

The COMMISSIONER OF PATENTS AND TRADEMARKS IS requested to apply the Issue Fee to the application identified above.

(Authorized Signature)

Reg. No. 38,285 (Date) 5/17/99

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